REMARKS/ARGUMENTS

Claims 60-64 were examined. The examined claims have been amended and new claims added as noted above. All non-elected claims have been canceled. Reexamination and reconsideration of the claims, as amended, are respectfully requested.

The claims were rejected as being indefinite. The grounds for rejection, however, are somewhat unclear, as the Examiner asserts that "Claim 60 is unclear from the specification how scoring the lesion with a scoring structure occurs."

Applicants don't understand how the specification could be considered as failing to describe scoring structures and their use. The specification includes numerous embodiments of specific scoring structures with ample description in the specification that the scoring structures are carried on a balloon catheter (as illustrated in some of the figures) and expanded in situ within a body lumen lesion to score the lesion.

Nonetheless, in order to conform claim 60 more closely to the specification,
Applicants have amended claim 60 to recite that the scoring structure comprises "metal scoring
elements" and further that "the balloon is expanded to engage the scoring elements against
stenotic material in the lesion to cut the stenotic material." With these amendments, Applicants
believe that the rejections for indefiniteness have been overcome.

Turning now to the substantive rejections, all examined claims were rejected as being anticipated by the Dror '402 patent. Such rejections are respectfully traversed. The Dror '402 patent describes a balloon catheter having frangible drug capsules carried on its outer surface. The drug capsules may be carried in a variety of ways, but nowhere is it ever described that the drug capsules will ever score or cut a lesion. Indeed, it is noted in Col. 2, lines 44-47, that the microcapsules rupture at a pressure which is "far less" than the normal pressure at which angioplasty balloons are operated. Thus, it is clear from the teachings as a whole that the microcapsules are intended to rupture before they would be expected to score the lesion.

The Examiner argues that the lesion would be scored "as the balloon is inflated which ...[places]...elements 16 directly against the other tissue of the vessel wall, thus it will create some ...[sort]...of scoring the lesion." Applicants respectfully disagree as there is no

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support anywhere in Dror for this contention. Indeed, as noted above, it is specifically taught that the microcapsule 16 will rupture upon balloon inflation, even when the balloon is inflated at pressures "far less" than those normally employed in angioplasty.

Thus, Applicants believe that claim 60, particularly as amended for clarity, clearly distinguishes the teachings of Dror '402. Dror nowhere teaches the use of "metal scoring elements" and never discloses or suggests that metal scoring elements or even the microcapsules 16 "cut the stenotic material."

Applicants note that new dependent claims 69 and 70 have been added to set forth certain particular aspects of the present invention. Claim 69 sets forth that the scoring cage is carried over but not attached to the expansible balloon. Claim 70 further sets forth that the scoring elements in the non-attached scoring cage are arranged helically over the expansible balloon.

CONCLUSION

In view of the above amendments and remarks, Applicants believe that all pending claims are in condition for allowance and request that the application be passed to issue at an early date.

If for any reason the Examiner believes that a telephone conference would in any way expedite prosecution of the subject application, the Examiner is invited to telephone the undersigned at 650-326-2400.

Respectfully submitted,

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